## TRANSMITTAL FORM

I hereby certify that this correspondence is being deposited with the United States Postal Service as "Express Mail" under Label No. EL 859 180 216 US in an envelope addressed to: Box Patent Application, Assistant Commissioner for Patents, Washington, D.C. 20231 on:

> January 15, 2002 (Date of Deposit)

**Box Patent Application** Assistant Commissioner For Patents Washington, D.C. 20231

Attorney Doc. #: 67,200-571 Mailing Date:

Dear Sir:

Transmitted herewith for filing is the patent application of:

Inventor(s):

Yen-Ming Chen

Chia-Fu Lin

Yang-Tung Fan

Hong-Wen Huang

Cheng-Yu Chu

For:

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Microelectronic Fabrication With Corrosion Inhibited Bond Pad

Submitted herewith are:

sheets of formal drawings showing Figs 1-5

An Assignment of the invention to Taiwan Semiconductor Manufacturing Co., Ltd., together with Assignment Recordal Sheet

\_ X \_\_ A Declaration for patent application under CFR 1.63 and 1.68

A Disclosure Statement, PTO Form 1449; together with cited art

The filing fee has been calculated as shown below:

	No. Filed	No. Extra	Small Entity Fee	Large Entity Fee	Total
Basic Fee			\$370.00	\$740.00	\$740.00
Total Claims	16x20	0 x	\$9.00	\$18.00	\$0
Indep. Claims	4 -3	1 x	\$42.00	\$84.00	\$84.00
Multiple Dep. Clms.			\$140.00	\$280.00	\$0
Assign. Rec. Fee			\$40.00	\$40.00	\$40.00
TOTAL					\$864.00

Mailing Date: 990-15, 2002 Attorney Docket No.: 67, 200-571

	_X	Attached is a Credit Card Payment Form for the sum of \$ \( \begin{align*} \			
	<u>X</u>	X Charge Visa Credit Card No. 4756 8461 9568 0263 the sum of \$ 864.00 A duplicate copy of this transmittal is attached.			
•	<u>X</u>	The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Visa Credit Card No. <u>4756 8461 9568 0263</u> . A duplicate copy of this sheet is enclosed.			
te i		<ul> <li>X Any additional filing fees required under 37 CFR 1.6</li> <li>X Any patent application processing fees under 37 CFR 1.17</li> </ul>			
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	RWT/ko	i			